

| Class | Subclass |
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ISSUE CLASSIFICATION

PATENT NUMBER

|   |             |
|---|-------------|
| O.I.P.E.                                | PATENT DATE |
| AK<br>SCANNED <i>cyg</i> Q.A. <i>Am</i> |             |

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|------------------------------|-------------------|--------------------------------|------------------|--------------------------|------------------------------|
| APPLICATION NO.<br>09/743897 | CONT/PRIOR<br>D F | CLASS<br><del>257</del><br>310 | SUBCLASS<br>3341 | ART UNIT<br>2811<br>2821 | EXAMINER<br>Douglas<br>H. H. |
|------------------------------|-------------------|--------------------------------|------------------|--------------------------|------------------------------|

## APPLICANTS

[illegible]

**TITLE**

Method: 17 patients (10 males) were fitted with a 24-hr ambulatory blood pressure monitor.

PTO-2040  
12/89[illegible]

|   |  |              |            |                                   |                      |
|---|--|--------------|------------|-----------------------------------|----------------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>   | <b>DRAWINGS</b>                              |              |            | <b>CLAIMS ALLOWED</b>             |                      |
|   | Sheets Drawg.                                | Figs. Drawg. | Print Fig. | Total Claims                      | Print Claim for O.G. |
| <input type="checkbox"/> The term of this patent<br>subsequent to _____ (date)<br>has been disclaimed.  | _____<br>(Assistant Examiner) (Date)         |              |            | <b>NOTICE OF ALLOWANCE MAILED</b> |                      |
|   |  |              |            |                                   |                      |
| <input type="checkbox"/> The term of this patent shall<br>not extend beyond the expiration date<br>of U.S Patent. No. _____<br><br>_____<br><br>_____   | _____<br>(Primary Examiner) (Date)           |              |            | <b>ISSUE FEE</b>                  |                      |
|   |  |              |            | Amount Due                        | Date Paid            |
| <input type="checkbox"/> The terminal ____ months of<br>this patent have been disclaimed.   | _____<br>(Legal Instruments Examiner) (Date) |              |            | <b>ISSUE BATCH NUMBER</b>         |                      |
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